PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Poster Typher 10/53/900

CLAIMS AS FILED - PART I								SMALL ENTITY		OB	OTHER THAN	
L			(Colum	ın 1)		(Column 2)	-	TYPE	<u>ل</u> ــا	OR -	SMALL	ENTITY
Ų.S. NATIONAL STAGE FEES								RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT	·. = \$ 150	LAR	GE ENT. = \$ 300]	BASIC FEE		OR	BASIC FEE	200
EXAMINATION FEE			Satisfies PCT A (4) = \$50	٠.	1	other situations = \$ 100 / \$ 200	1	EXAM. FEE		1	EXAM. FEE	200
SEARCH FEE			ALL other cou	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	480
FEE	E FOR EXTRA	SPEC. PGS.	min	minus 100 =		/ 50 =		X \$ 125 =		1	X \$ 250 =	ľ
тот	TAL CHARGEA	BLE CLAIMS	39 min	9 minus 20 = ,		9		X \$ 25 =		OR	X \$ 50 =	MSD
IND	EPENDENT CL	_AIMS	2 m	ninus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	IDENT CLAIM PRI	ESENT			9	1	+ \$ 180 =	ļ	OR	+ \$ 360 =	350
* If	the difference	e in column 1 is l	less than zero	o, enter "()" in co	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
MTA		CLAIMS REMAINING . . AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 = .	
AMEN	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF M	IULTIPLE DEPE	ENDENT (CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
						-	TOTAL ADDIT. FEE	·	OR	TOTAL ADDIT. FEE		
		(Ostumn 4)		(Colum	- 3\	(Calumn 3)				,		
۲ 8		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIOU PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	•	Minus	**				X \$ 25 =		OR	X \$ 50 =	
AMENDMENT	Independent	*	Minus	***.		=		X \$ 100 =		or	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
,							.1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
** #	If the "Highest Nur	ımn 1 is less than the Imber Previously Paid	d For" IN THIS SPA	ACE is less	than '20'	', enter "20".		·				

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)